

AUTHORITY

Bureau of HIV and STD Prevention

HIV/STD Clinical Resources Division HIV/STD Epidemiology Division HIV/STD Health Resources Division

Rev. November 30, 2000 Est. November 8, 1995

HIV/STD Policy No. 120.100

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GUIDANCE REGARDING PREGNANT WOMEN PRESENTING TO PCPE SITES FOR SEROLOGIC TESTING FOR HIV INFECTION

PURPOSE The purpose of this policy is to provide information and guidance to Partner Counseling

Partner Elicitation (PCPE) sites under contract with the Texas Department of Health (TDH), Bureau of HIV and STD Prevention (Bureau) regarding testing of pregnant women for HIV. The women may be referred to a PCPE contractor by their health care provider or may be presenting to the site to test for HIV infection.

As passed by the 76th Texas Legislature and signed by the Governor, Senate Bill 519 (the Act) amends Health and Safety Code, §81.090.

The Act took effect September 1, 1999, and, in itself, applies to a physician or other person attending a pregnant woman during gestation or when a woman is admitted for delivery of an infant. The effect of the Act on the Bureau's related grantees is guided by this policy. For the purposes of this policy, the terms "physician" and "other person permitted by law" attending a pregnant woman shall be referred to as "health care provider."

GUIDANCE FOR TDH FUNDED SITES

Anonymous testing protocols have not changed with the passage of the Act. TDH funded PCPE sites must follow the established protocol when performing anonymous testina.

Health care provider referrals to the PCPE site

Pregnant women referred to a TDH funded PCPE site because they refused confidential HIV testing by their health care providers, are to be given an anonymous test following the TDH protocols. These protocols are outlined in the TDH "HIV Serologic Testing and Documentation Guidelines."

Pregnant woman presents to the PCPE site for testing

When a pregnant woman presents to a PCPE site staff must first determine if the pregnant woman has a health care provider and if she has been referred to the contractor for an anonymous test or if the woman is presenting for HIV counseling and testing before seeing a health care provider. The woman who has not seen a health care provider and is presenting to a TDH funded PCPE site for HIV testing should be advised of the difference between a confidential test and an anonymous test. The woman should be informed that a confidential HIV test will be performed by her health care provider at her first prenatal visit unless she objects. When the woman has a health care provider PCPE sites should send her to the provider for prenatal care unless she indicates that she prefers the anonymous test; when she does not have a health care provider the PCPE site should follow established protocols and initiate appropriate health care referrals.

Counseling

TDH funded PCPE sites are required to provide risk reduction counseling to pregnant women considered to be at high risk for contracting HIV and who are referred by a health care provider to the facility for counseling.

TDH funded PCPE sites are required to provide risk reduction counseling, referral and partner elicitation to women testing **HIV positive** who may be referred by their health care provider.

Reimbursement

When the pregnant woman has insurance coverage the health care provider may be eligible to receive third-party reimbursement for these tests.

Referral to Services

Testing alone will not prevent perinatal transmission of HIV. All pregnant women infected with HIV must be afforded ongoing care and treatment through referral to prenatal care which includes counseling about antiretroviral drug therapy and its use in reducing the risk of transmitting HIV from mother to child.

If a PCPE site identifies HIV infection in a pregnant woman, she should immediately be referred to prenatal care. In this regard, counseling sites are required to develop a referral program to available prenatal care and health and social service programs in their respective area. PCPE sites are responsible for assisting with the setting of appointments to these programs and for documenting the referral in the client's record. Assistance in locating a prenatal care referral resource is available by contacting a registered nurse in the HIV/STD Clinical Resources Division at (512) 490-2505.

REVIEW

The HIV/STD Health Resources Division, Field Operations Branch staff will periodically review counseling and testing sites for compliance with this policy.

DATE OF LAST REVIEW:

45 November 13, 2002

Converted format from WordPerfect to Word.

1	REVISIONS	
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3	Page 1, line 1, 2	deleted the title of the policy "SEROLOGIC TESTING FOR
4		HIV INFECTION IN PREGNANT WOMEN" and replaced it
5		with "GUIDANCE REGARDING PREGNANT WOMEN
6		PRESENTING TO PCPE SITES FOR SEROLOGIC
7		TESTING FOR HIV INFECTION"
8	Page 1, line 4,5	deleted the phrase "Counseling, Testing, Referral, and
9		Partner Elicitation (CTRPE)" and replaced it with the phrase
10		"Partner Counseling Partner Elicitation (PCPE)
11	Page 1, line 6,7	added the sentence "The women may be referred to a PCPE
12		contractor by their health care provider or may be presenting
13		to the site to test for HIV infection." at the end of the
14		paragraph

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Major changes were made to the remainder of the policy. In order to avoid confusion, the wording on page one, line 14 to the end of the policy was deleted. The new material begins on page one, line 15 with the heading GUIDANCE FOR TDH FUNDED SITES.